

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	B.H.	60745	
O.I.P.E. CLASSIFIER		20	6/12
FORMALITY REVIEW	LW	68904	6/19/98

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	1	✓	
2	2	✓	
3	3	✓	
4	4	✓	
5	5	✓	
6	6	✓	
7	7	✓	
8	8	✓	
9	9	✓	
10	10	✓	
11	11	✓	
12	12	✓	
13	13	✓	
14	14	✓	
15	15	✓	
16	16	✓	
17	17	✓	
18	18	✓	
19	19	✓	
20	20	✓	
21	21	✓	
22	22	✓	
23	23	✓	
24	24	✓	
25	25	✓	
26	26	✓	
27	27	✓	
28	28	✓	
29	29	✓	
30	30	✓	
31	31	✓	
32	32	✓	
33	33	✓	
34	34	✓	
35	35	✓	
36	36	✓	
37	37	✓	
38	38	✓	
39	39	✓	
40	40	✓	
41	41	✓	
42	42	✓	
43	43	✓	
44	44	✓	
45	45	✓	
46	46	✓	
47	47	✓	
48	48	✓	
49	49	✓	
50	50	✓	

Claim	Final	Original	Date
51	51	✓	
52	52	✓	
53	53	✓	
54	54	✓	
55	55	✓	
56	56	✓	
57	57	✓	
58	58	✓	
59	59	✓	
60	60	✓	
61	61	✓	
62	62	✓	
63	63	✓	
64	64	✓	
65	65	✓	
66	66	✓	
67	67	✓	
68	68	✓	
69	69	✓	
70	70	✓	
71	71	✓	
72	72	✓	
73	73	✓	
74	74	✓	
75	75	✓	
76	76	✓	
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80	80	✓	
81	81	✓	
82	82	✓	
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87	87	✓	
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89	89	✓	
90	90	✓	
91	91	✓	
92	92	✓	
93	93	✓	
94	94	✓	
95	95	✓	
96	96	✓	
97	97	✓	
98	98	✓	
99	99	✓	
100	100	✓	

Claim	Final	Original	Date
110	110	✓	
111	111	✓	
112	112	✓	
113	113	✓	
114	114	✓	
115	115	✓	
116	116	✓	
117	117	✓	
118	118	✓	
119	119	✓	
120	120	✓	
121	121	✓	
122	122	✓	
123	123	✓	
124	124	✓	
125	125	✓	
126	126	✓	
127	127	✓	
128	128	✓	
129	129	✓	
130	130	✓	
131	131	✓	
132	132	✓	
133	133	✓	
134	134	✓	
135	135	✓	
136	136	✓	
137	137	✓	
138	138	✓	
139	139	✓	
140	140	✓	
141	141	✓	
142	142	✓	
143	143	✓	
144	144	✓	
145	145	✓	
146	146	✓	
147	147	✓	
148	148	✓	
149	149	✓	
150	150	✓	

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)